

Please type a plus (+) sign in this box → ☒

PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

For new non-provisional applications under 37 C.F.R. § 1.53(B)

Attorney Docket No. N19.12-0051

First Inventor or Application Identifier Home et al.

Title METAL VANADIUM OXIDE PARTICLES

Express Mail Label No. EL636052522US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Address To:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ *Fee Transmittal Form e.g., PTO/SB17)
(Submit an original and a duplicate for fee processing)

2. ☒ Specification [Total Sheets- - 47]

- (preferred arrangement set forth below)
- Descriptive title of the Invention)
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention

- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

☒ Drawing(s) (35 U.S.C. § 113) [Total Sheets - 12]

Oath or Declaration [Total Sheets 3]

- a. ☐ Newly executed (original or copy)
- b. ☒ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)

- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

5. ☐ Microfiche Computer Program (Appendix)

6. ☐ Nucleotide and/or Amino Acid Sequence Submission
(If applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (Identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))

8. ☐ 37 C.F.R. § 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney

9. ☐ English Translation Document

10. ☐ Information Disclosure Statement (IDS/PTO - PTO) ☐ Copies of IDS

11. ☒ Preliminary Amendment

12. ☒ Return Receipt Postcard (MPEP 503)

13. ☐ *Small Entity ☒ Statement filed in prior application.
Statement(s) Status still proper and desired
(PTO/SB/09-12)

14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. ☐ Request and Cert. Under 35 USC 122 (Non-Pub)

16. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☒ Continuation ☐ Divisional ☐ Continuation -in part (CIP) of prior application No: 09/246,076

Prior application information: Examiner J. Strickland

Group/Art Unit: 1754

FOR CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

Name Peter S. Dardi, Ph.D.
WESTMAN CHAMPLIN & KELLY

Address Suite 1600 - International Centre
900 South Second Avenue

City Minneapolis

State MN

Zip Code 55402-3319

Country USA

Telephone (612) 334-3222

Fax (612) 334-3312

Name (Print/type) Peter S. Dardi, Ph.D.

Registration No. (Attorney/Agent) 39,650

Signature

Peter S. Dardi

Date 1/9/01

01-11-01

A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Horne, et al
Filed: Continuation of 09/246,076
For: METAL VANADIUM OXIDE PARTICLES
Docket No. N19.12-0051

TRANSMITTAL LETTER

"Express Mail" mailing label number: EL636052522US
Date of Deposit: January 9, 2001

The following paper(s) are being deposited with the United States Postal Service "Express Mail Post Office to Addressee", addressed to Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231

1. Utility Patent Application Transmittal
2. Continuation Patent Application comprising the following pages:
 - 1 pg Abstract
 - 43 pgs Specification
 - 3 pgs Claims
 - 12 Sheets of Informal drawings.
3. Transmittal Letter
4. Fee Calculation Sheet (in duplicate)
5. Declaration
6. Assignment and Recordation Cover Sheet
7. Checks in the amounts of \$364.00 and \$40.00
8. Post Card.

Under 37 CFR § 1.136(a) (3), applicants hereby authorize for any future reply, the incorporation of any required petition for extension of time for the appropriate length of time and authorize the charging of fees under § 1.17 to deposit account 23-1123.

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

BY: Peter S. Dardi

Peter S. Dardi, Ph.D.

Reg. No. 39,650

Suite 1600 - International Centre

900 Second Avenue South

Minneapolis, MN 55402-3319

01/09/01
JC986 U.S. PTO

01/09/01

FEE TRANSMITTAL		Complete if Known																																																																																																																																																																									
		Application No.	Continuation of 09/246,076																																																																																																																																																																								
		Filing Date	Herewith																																																																																																																																																																								
		First Named Inventor	Horne et al.																																																																																																																																																																								
		Title	METAL VANADIUM OXIDE PARTICLES																																																																																																																																																																								
		Group Art Unit																																																																																																																																																																									
		Examiner Name																																																																																																																																																																									
Total Amount of Payment \$ 364		Atty. Docket Number	N19.12-0051																																																																																																																																																																								
METHOD OF PAYMENT (Check One)		FEE CALCULATION (Continued)																																																																																																																																																																									
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fee required under 37 C.F.R. § 1.16 and 1.17, including any petition fee, and credit any over payments to Deposit Account No. <u>23-1123</u> . Westman, Champlin & Kelly, P.A. 2. <input checked="" type="checkbox"/> Check Enclosed		3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee</th> <th style="text-align: left;">Small Entity Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>116</td> <td>390</td> <td>216</td> <td>195</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>117</td> <td>890</td> <td>217</td> <td>445</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>118</td> <td>1,390</td> <td>218</td> <td>695</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>128</td> <td>1,890</td> <td>280</td> <td>945</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>120</td> <td>310</td> <td>220</td> <td>155</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>121</td> <td>270</td> <td>221</td> <td>135</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>148</td> <td>110</td> <td>248</td> <td>55</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>141</td> <td>1,240</td> <td>241</td> <td>620</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>142</td> <td>1,270</td> <td>242</td> <td>650</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>143</td> <td>470</td> <td>243</td> <td>250</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>126</td> <td>240</td> <td>126</td> <td>240</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid	Code	(\$)	Code	(\$)	105	130	205	65					127	50	227	25					139	130	139	130					147	2,520	147	2,520					115	110	215	55					116	390	216	195					117	890	217	445					118	1,390	218	695					128	1,890	280	945					120	310	220	155					121	270	221	135					148	110	248	55					140	110	240	55					141	1,240	241	620					142	1,270	242	650					143	470	243	250					122	130	122	130					123	50	123	50					126	240	126	240					581	40	581	40				
Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid																																																																																																																																																																								
Code	(\$)	Code	(\$)																																																																																																																																																																								
105	130	205	65																																																																																																																																																																								
127	50	227	25																																																																																																																																																																								
139	130	139	130																																																																																																																																																																								
147	2,520	147	2,520																																																																																																																																																																								
115	110	215	55																																																																																																																																																																								
116	390	216	195																																																																																																																																																																								
117	890	217	445																																																																																																																																																																								
118	1,390	218	695																																																																																																																																																																								
128	1,890	280	945																																																																																																																																																																								
120	310	220	155																																																																																																																																																																								
121	270	221	135																																																																																																																																																																								
148	110	248	55																																																																																																																																																																								
140	110	240	55																																																																																																																																																																								
141	1,240	241	620																																																																																																																																																																								
142	1,270	242	650																																																																																																																																																																								
143	470	243	250																																																																																																																																																																								
122	130	122	130																																																																																																																																																																								
123	50	123	50																																																																																																																																																																								
126	240	126	240																																																																																																																																																																								
581	40	581	40																																																																																																																																																																								
1. BASIC FILING FEE <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee</th> <th style="text-align: left;">Small Entity Fee</th> <th style="text-align: left;">Fee Description</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>101</td> <td>710</td> <td><input checked="" type="checkbox"/> Utility Filing Fee</td> </tr> <tr> <td>106</td> <td>320</td> <td><input type="checkbox"/> Design Filing Fee</td> </tr> <tr> <td>108</td> <td>710</td> <td><input type="checkbox"/> Reissue Filing Fee</td> </tr> <tr> <td>114</td> <td>150</td> <td><input type="checkbox"/> Prov. Filing Fee</td> </tr> <tr> <td colspan="3" style="text-align: right;">Subtotal (1) \$ 355</td> </tr> </tbody> </table>		Large Entity Fee	Small Entity Fee	Fee Description	Code	(\$)		101	710	<input checked="" type="checkbox"/> Utility Filing Fee	106	320	<input type="checkbox"/> Design Filing Fee	108	710	<input type="checkbox"/> Reissue Filing Fee	114	150	<input type="checkbox"/> Prov. Filing Fee	Subtotal (1) \$ 355																																																																																																																																																							
Large Entity Fee	Small Entity Fee	Fee Description																																																																																																																																																																									
Code	(\$)																																																																																																																																																																										
101	710	<input checked="" type="checkbox"/> Utility Filing Fee																																																																																																																																																																									
106	320	<input type="checkbox"/> Design Filing Fee																																																																																																																																																																									
108	710	<input type="checkbox"/> Reissue Filing Fee																																																																																																																																																																									
114	150	<input type="checkbox"/> Prov. Filing Fee																																																																																																																																																																									
Subtotal (1) \$ 355																																																																																																																																																																											
2. EXTRA CLAIM FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Number Claims</th> <th>Prior**</th> <th>Extra</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>21</td> <td>20</td> <td>3</td> <td>9</td> <td>27</td> </tr> <tr> <td>Indep.</td> <td>3</td> <td>3</td> <td>0</td> <td>40</td> <td>0</td> </tr> </tbody> </table> <p>Multiple Dependent Claims</p> <p>** Insert 3 and 20, or number previously paid if greater; Reissue see below</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee</th> <th style="text-align: left;">Small Entity Fee</th> <th style="text-align: left;">Description</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>Claims in excess of 20</td> </tr> <tr> <td>102</td> <td>80</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>104</td> <td>270</td> <td>Multiple Dependent Claims</td> </tr> <tr> <td>109</td> <td>80</td> <td>Reissue Independent Claims over Original Patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="3" style="text-align: right;">Subtotal (2) \$ 9</td> </tr> </tbody> </table>			Number Claims	Prior**	Extra	Fee from Below	Fee Paid	Total	21	20	3	9	27	Indep.	3	3	0	40	0	Large Entity Fee	Small Entity Fee	Description	Code	(\$)		103	18	Claims in excess of 20	102	80	Independent claims in excess of 3	104	270	Multiple Dependent Claims	109	80	Reissue Independent Claims over Original Patent	110	18	Reissue claims in excess of 20 and over original patent	Subtotal (2) \$ 9			Other Fee (specify) _____ <div style="text-align: right;">Subtotal (3) \$</div>																																																																																																																															
	Number Claims	Prior**	Extra	Fee from Below	Fee Paid																																																																																																																																																																						
Total	21	20	3	9	27																																																																																																																																																																						
Indep.	3	3	0	40	0																																																																																																																																																																						
Large Entity Fee	Small Entity Fee	Description																																																																																																																																																																									
Code	(\$)																																																																																																																																																																										
103	18	Claims in excess of 20																																																																																																																																																																									
102	80	Independent claims in excess of 3																																																																																																																																																																									
104	270	Multiple Dependent Claims																																																																																																																																																																									
109	80	Reissue Independent Claims over Original Patent																																																																																																																																																																									
110	18	Reissue claims in excess of 20 and over original patent																																																																																																																																																																									
Subtotal (2) \$ 9																																																																																																																																																																											

Signature Peter S. Dardi
(Peter S. Dardi)

Reg. No. 39,650

Date January 9, 2001

Deposit Account No. 23-1123